FORM D

SECURITIES AND EXCHANGE COM Washington, D.C. 20549

SEC Mail Mail Processing

FORM D

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response 16.00

OMB APPROVAL

Section

JUN 1 9 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

SEC USE ONLY							
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DATE RECEIVED							
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Washington, DC UNIFORM LIMITED OFFERING EXEMPTION Name of Offering(check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock Financing Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): New Filing Amendment Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer THOMSON REUT Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Vertiflex, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 1351 Calle Avanzado, San Clemente, CA 92673 (949) 940-1400 Address of Principal Business Operations Telephone Number (Including Area Code) (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Medical device development Type of Business Organization M corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: 0 8 0 4 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

GENERAL INSTRUCTIONS

Rederal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

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CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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	in the second	A. BASIC ID	ENTIFICATION DATA.			
2. Enter the information rec	quested for the fo	ollowing:				
Each promoter of the	e issuer, if the iss	uer has been organized	within the past five years;			
 Each beneficial owner 	r having the powe	r to vote or dispose, or di	rect the vote or disposition of	f, 10% or more of	a class	of equity securities of the issuer.
Each executive offic	er and director of	corporate issuers and of	f corporate general and man	aging partners of	partne	rship issuers; and
		of partnership issuers.		0 01	•	•
<u> </u>			₩	57.5	r-m	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director		General and/or Managing Partner
Full Name (Last name first, if in Earl Fender, President and	,	,				
Business or Residence Address 1351 Calle Avanzado, San			Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if i Keegan Harper	ndividual)					
Business or Residence Addres 6354 Corte Del Abeto, Sui			Code)			· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: Managing Partner	Promoter	Beneficial Owner	Executive Officer	Director		General and/or
Full Name (Last name first, if Daniel H. Kim, M.D., Chie		icer	·		··-·	····
Business or Residence Address 411 Los Ninos Way, Los	•		Code)	· -,,		*
Check Box(es) that Apply:	Promoter	Beneficial Owner	r Executive Officer	□ Director		General and/or Managing Partner
Full Name (Last name first, if Paul Klingenstein	(individual)	***************************************				
Business or Residence Addresc/o Aberdare Ventures, Or				11		
Check Box(es) that Apply:	Promoter	Beneficial Owner	r Executive Officer	⊠ Director		General and/or Managing Partner
Full Name (Last name first, if Guy P. Nohra	findividual)	,				***************************************
Business or Residence Addre c/o Alta Partners VIII, L.P				94111		
Check Box(es) that Apply:	Promoter	Beneficial Owner	F Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if Robin Bellas	findividual)					
Business or Residence Addre c/o Morgenthaler Partners				;;•		··· <u>·</u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	r Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if Aberdare Ventures and Af	•		· · · · · · · · · · · · · · · · · · ·		-1	· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	,		,	0/111		

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Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i Morgenthaler Partners VI	,				
Business or Residence Addre Attn: Gary Shaffer, 2710	,				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Alta Partners VIII, L.P.	if individual)		799		
Business or Residence Addre Attn: Guy P. Nohra, One					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i New Enterprise Associate	•				
Business or Residence Addre 2490 Sand Hill Road, Me			ode)		

		,		,' '	B. IN	FORMAT	ION ABOU	T OFFER	ING		1 1		
												Yes	No
1.	Has the	issuer sold	, or does the	issuer inte	nd to sell, t	o non-accre	dited investo	ors in this o	ffering?		•••••		\boxtimes
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	2. What is the minimum investment that will be accepted from any individual?								\$ 0.00				
												Yes	No
3.			ermit joint									. 🖂	
4.			ion request										
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state									h a state				
or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									of such	•			
Full			irst, if indiv					VIII.J.					
							·····						
Bus	iness or	Residence A	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Nar	ne of As	sociated Bro	oker or Deal	ler									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Pure	hacerc			 	•		
Stat													II States
			tes" or check										_
	AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID
	IL IN IA KS KY LA ME MD MA MI MN									MS	МО		
MT NE VV VH NJ NM VY NC ND OH DK									рκ	OR	PA		
RI SC SD TN TX UT VT VA WA WY WI									wı	WY	PR		
Full	Full Name (Last name first, if individual)												
ruii Naine (Last name lifst, ii individual)													
Bus	iness or	Residence A	Address (Nu	imber and S	Street, City,	State, Zip	Code)						
Nar	ne of As	sociated Br	oker or Deal	ler									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	chasers		<u>.</u>	······································			
	(Ch	eck "All Sta	tes" or checl	k individual	States)							🗖 A	All States
	AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	[al]
	IL)	M	ĪΑ	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	닏	<u></u>		=	<u></u>	=	<u> </u>	لبيب	=	<u> </u>			لببيا
	МТ	NE	٧V	NH	Ги	NM	NY	NC	ND	ОН	Þκ	OR	PA
	RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Ful	l Name ((Last name t	first, if indiv	ridual)									
Bus	iness or	Residence	Address (Ni	ımber and S	Street, City.	State, Zip	Code)				<u>.</u>		
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)										All States			
	AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	₽A	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	МТ	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	рκ	OR	PA
	RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	wi	WY	PR
					السيسا	لسسا	لنا	البيت	تت	تنت	لبتينا	لبنت	لبنت

	(Use blank sheet, or copy and use additional copies of this sheet, as nece		
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Alread Sold
	Debt		\$
	Equity \$	28,280,796.7	9 \$ 28,280,796.81
	☐ Common 🔀 Preferred		
	Convertible Securities (including warrants)		_ s
	Partnership Interests\$		
	Other (Specify \$		\$
	Total\$	28,280,796.7	9 \$ 28,280,796.8
	Answer also in Appendix, Column 3, if filing under ULOE.		
	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors		5 \$ 28,280,796.8
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		_ \$
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	·	
	Type of Offering	Type of Security	Dollar Amou Sold
	Rule 505	0	<u> </u>
	Regulation A		<u>)</u> \$
	Regulation A		- · ———
			- · ———
1	Rule 504		<u> </u>

Other Expenses (identify)

Printing and Engraving Costs.....

Legal Fees.....

Accounting Fees.....

Engineering Fees.....

Sales Commissions (specify finders' fees separately).....

Total.....

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49,000.00

49,000.00

□ s_____

□ s _____

□ s ___

⊠ s

□ \$

□ s

⊠ s

¹ Aggregate Dollar Amount of Purchases includes cash paid and cancellation of indebtedness for convertible promissory notes.

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	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	- Question 4.a. This	difference is the "adjusted gross	-	\$ <u>28,231,796.79</u>
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part				
		•		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		[s	□ \$
	Purchase of real estate				
	Purchase, rental or leasing and installation of ma		-		
	and equipment	***************************************		□ s	□ s
	Construction or leasing of plant buildings and fac	ilities] \$	□ s
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	ets or securities of	another	¬ s ·	□ \$
	Repayment of indebtedness				
	Working capital	⊠ s	S \$ 28,231,796.79		
	Other (specify):	<u> </u>	[s	□ s
				□ s	s
	Column Totals				
	Total Payments Listed (column totals added)	***************************************	•••••	⊠s	28,231796.79
		DEFENSE	SICMAPURE		
8ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnished by the issuer to any non-acc	mish to the U.S. Se	curities and Exchange Commis	sion, upon writ	Rule 505, the following ten request of its staff,
lss	uer (Print or Type)	Signature , A		Date	
V	rtiflex, Inc.	Uplif	\	June/S., 20	በጽ
_	me of Signer (Print or Type)	Title of Signer (\	, 20	
	Casey McGlynn	Secretary	, -vr-,		
_	,,-	200.000,			

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END